



# SAGE University Indore

Address: Kailod Kartal, Indore-Dewas Bypass Road, Rau, Indore, (MP) 452020

Email - [phdcell@sageuniversity.in](mailto:phdcell@sageuniversity.in), Website - [www.sageuniversity.in](http://www.sageuniversity.in)

## Entrance Application for Ph.D. Program

Session – 2024-25

Self-Attested  
Photograph

Subject for Entrance Test: \_\_\_\_\_

Branch in which you want to do Ph.D.: \_\_\_\_\_

Branch in which you have P.G. Degree: \_\_\_\_\_

1. Applicant's Name (In English) – .....

(In Hindi) – .....

2. Date of Birth (DD/MM/YYYY) –

3. Domicile of M.P. (If yes, attach photocopy of domicile proof) – Yes / No.....

4. Category –

(Please attach photocopy of proof of category of SC/ST/ OBC (non-creamy layer)/Differently-Abled)

5. Gender: .....

6. Blood Group: .....

7. Aadhar Card No.: .....

8. Nationality:.....

9. Name of the Father: .....

10. Name of the Mother .....

11. Yearly Income of Parents: Rs. ....

12. Are you UGC/ CSIR NET-JRF Qualified? Yes/ No.....

13. Do you have Teacher Fellowship for Research? Yes/ No .....

14. Do you have Government/ Foreign Research Fellowship? Yes/ No.....

15. Do you have M. Phil. Degree (as per UGC Regulations 2017 or amended thereafter) with course work? (Yes/No).....

(in case of "Yes" in any of the above mentioned questions no. 12-15, please provide photocopy of the proof of the same)

**16. Applicant's Address**

A. **Permanent:** .....

.....

B. **Correspondence**.....

.....

C. **Mobile No. (Candidate):** ..... **Alternate Mobile No.**.....

D. **Mobile No. (Whatsapp):** ..... **Parents Mobile No.**.....

E. **E-mail Id of the Candidate**.....

**17. Educational Qualifications** (Enclose self attested photocopies):

Class	Board/University	Year	Grade/ % of Marks	Division	Subject
10 <sup>th</sup>					
12 <sup>th</sup>					
UG					
PG					
M. Phil.					
Any Other					

18. Fee Details: **Amount (Rs.):** ..... **Demand Draft No.:** ..... **Date:**.....

**Name of the Issuing Bank & branch**.....

19. **Teaching / Research Experience (If any):** .....

20. **Any other information:** .....

Date:

(Signature of Applicant)